31-E R.C. 3517.10(B)

## Statement of Contributions Received at a Social or Fund-Raising Event

Event Date	2/4/16
Page 2	

Prescribed by Secretary of State 03/05

Name of Committee in Full  Committee to Elect Kline for Judge				-
Full Name of Contributor		<del>-</del>	Registration Number, if PAC	
Kelly G Boller Attorney at Law			iogisauton rumos, ti rrie	
Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
595 1/2 S 3rd St, STE. K			0 2 0 4 1 6 \$100.00	)
City	State	Zip Code	Form (Cash, Check, etc.)	p .
Columbus	OH	43215	Check	
Full Name of Contributor			Registration Number, if PAC	
Monica & Thaddeus Kagey Street Address				
12248 Tanglewood Ln	Employer/Occup	ation/Labor Organization*	M D Y Amount 0 2 0 4 1 6 \$100.00	,
City	Stal te	Zip Code	0 2 0 4 1 6 \$100.00 Form (Cash, Check, etc.)	,
Pickerington	OH	43147	Check	
Full Name of Contributor		10.11	Registration Number, if PAC	4 8
Herbert for Judge W. L. Curlis Treasuer				
Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
865 Macon Aly			0 2 0 4 1 6 \$200.00	)
City	Starte	Zip Code	Form (Cash, Check, etc.)	**
Columbus	ОН	43206	Check	
Full Name of Contributor		······································	Registration Number, if PAC	
Andrew F Selwa Street Address				
695 Island Ct	Employer/Occup	ation/Labor Organization*	M D Y Amount 0 2 0 4 1 6 \$50.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	4 12 2
Columbus	OH	43214	Check	
Full Name of Contributor			Registration Number, if PAC	:
William L Archer Jr. Attorney at Law				
Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
P.O. Box 482			0 2 0 4 1 6 \$100.00	
City Circleville	OH	Zip Code 43113	Form (Cash, Check, etc.)	
	OII	45110		<u> </u>
Full Name of Contributor Jesse A Atkins			Registration Number, if PAC	
Street Address			M D Y Amount	<del></del>
35 E Livingston Ave, Suite D	Employer/Occup	ation/Labor Organization*	0 2 0 4 1 6 \$100.00	)
City	Sta te	Zip Code	Form (Cash, Check, etc.)	46.00
Columbus	OH	43215	Cash	
Full Name of Contributor			Registration Number, if PAC	<u> </u>
Paul E. Morrison, Attorney at Law, LLC				
Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	·
100 E Main St			0 2 0 4 1 6 \$100.00	) 
City Columbus	Sta te	Zip Code 43215	Form (Cash, Check, etc.)	
Columbus	OH	43210	Cash	

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this eve	nt
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\$2,820.00

Total expenditures this event.

\$223.58

Page Total \$ \$750.00

<sup>\*</sup> Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]